8:28:02 YC

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail in an envelope addressed to:

"Assistant Commissioner for Patents, Washington, D.C. 20231"

on August 7, 2002

KEVIN J. STEIN Reg. No. 47,966

Attorney for Applicant(s)

RECEIVED

AUG 1 6 2002

TECH CENTER 1600/2900

COPY OF PAPERS ORIGINALLY FILED

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Date of

Signature

Attorney Docket No.: J3509(C) Applicant: Johnson et al. Serial No.: 09/764,734

Filed:

January 17, 2001

For:

Antimicrobial Compositions

Group:

1616

Examiner:

A. Pryor

Edgewater, New Jersey 07020

August 7, 2002

RESPONSE

Assistant Commissioner for Patents Washington, D.C. 20231

Sir:

In response to the Office Action dated May 7, 2002, please consider the following remarks:

I hereby certify (that this correspondence its being deposited with the United States Postal Service as First Class Mail in an envelope addressed to Washington D KEVIN J. STEIN Reg. No. 47,966 Signature Attorney for Applicant(s) SERVICE AND ADDRESS OF THE PARTY OF THE PART

UNITED STATES DEPT. OF COMMERCE Patent and Trad mark Office

ASSISTANT COMMISSIONER FOR PATENTS Washington, D.C. 20231

RECEIVED

AUG 1 6 2002
TECH CENTER 1600/2900

COPY OF PAPERS ORIGINALLY FILED

Attorney Docket No.: J3509(C)

Applicant: Serial No.: Johnson et al. 09/764,734

Filed:

January 17, 2001

For:

Antimicrobial Compositions

Group:

1616

Examiner:

A. Pryor

Edgewater, New Jersey 07020

August 7, 2002

Assistant Commissioner for Patents Washington, D.C. 20231

Sir:

Transmitted herewith is an amendment in the above-identified application.

No additional fee is required.

The fee has been calculated as shown below.

CLAIMS AS AMENDED

	(2) * Claims Remaining After Amendment		(4)** Highest No. Previously Paid For	(5) Present Extra	(6) Rate	(7) Additional Fee
Total Claims		Minus			\$ 18.00	
Independent Claims		Minus			\$ 80.00	
Multiple Claims					\$ 270.00	
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$	

^{*}If the entry in Column (2) is less than the entry in Column (4), write "0" in Column (5).

__ to Deposit Acct. #12-1155. Triplicate copies of this letter are enclosed.

[X] The Commissioner is hereby authorized to charge any additional fees, which may be required to our deposit actiount No. 12-1155, including all required fees under

[X] 37 C.F.R. § 1.16;

[X] 37 C.F.R. § 1.17;

[X] 37 C.F.R. § 1.18.

Triplicate copies of this letter are enclosed.

KJS/sa 201) 840-2394 Kevin J. Stein

Registration No. 47,966 Attorney for Applicant(s)

REST AVAILABLE COPY

^{**}If the "Highest No. Previously Paid For" is less than "20," write "20" in this space.